PAGE 1 / 44

Image# 201510199003119485

FEC FORM 3Y

REPORT OF RECEIPTS AND DISBURSEMENTS

TOHW 3X	For Other Than An Aut	horized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, typ over the lines.	e 12FE4M5
American Council of I	_ife Insurers Political A	Action Committee	
ADDRESS (number and street)	101 Constitution Ave., NW Suite 700		
Check if different than previously reported. (ACC)	Washington		DC 20001 -
2. FEC IDENTIFICATION N	NUMBER ▼ CIT	TY A	STATE ▲ ZIP CODE ▲
C C00147066		S THIS NEW (N)	OR AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) May 20 20 (M3) Jun 20	(Non-Election Year Only)
(a) Quarterly Reports: April 15	Apr	20 (M4) Jul 20	Year Only)
Quarterly Report July 15 Quarterly Report	(c) 12-Day	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report	Report for the:	Convention (12C)	Special (12S)
January 31 Year-End Report	(YE) Election	on on	in the State of
July 31 Mid-Year Report (Non-elect Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Repo	rt Electio	on on	in the State of
5. Covering Period	09 01 2015		09
I certify that I have examined	this Report and to the best of	my knowledge and belief i	t is true, correct and complete.
Type or Print Name of Treasur	rer Mr. Donald L. Walker		
Signature of Treasurer Mr.	Donald L. Walker	[Electronically Filed]	Date 10 19 2015
NOTE: Submission of false, erro	neous, or incomplete informatio	n may subject the person sig	ning this Report to the penalties of 2 U.S.C. §437g.
Office Use Only			FEC FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)
Page 2

Write or Type Committee Name

American Council of Life Insurers Political Action Committee

Report Covering the Period: From: 09 01 2015 To: 09 30 2015

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2015		620787.98
	(b) Cash on Hand at Beginning of Reporting Period	601076.64	
	(c) Total Receipts (from Line 19)	53738.06	428031.72
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	654814.70	1048819.70
7.	Total Disbursements (from Line 31)	58500.00	452505.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	596314.70	596314.70
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Council of Life Insurers Political Action Committee

	COLUMN A			
I. Receipts	COLUMN B Calendar Year-to-Date			
ributions (other than loans) From:	<u> </u>			
	36833 28	222345.83		
(i) Itemized (use Schedule A)	30003.20	2223 16.00		
(ii) Unitemized	4404.78	26185.89		
Lines 11(a)(i) and (ii)	41238.06	248531.72		
Political Party Committees	0.00	0.00		
	12500.00	179000.00		
		7		
	53738.06	427531.72		
	7			
/ Committees	0.00	0.00		
oans Received	0.00	0.00		
Panaymenta Pagaiyad	0.00	0.00		
· ·	7	0.00		
· · · · · · · · · · · · · · · · · · ·	0.00	0.00		
		0.00		
	0.00	500.00		
	0.00	300.00		
·		0.00		
·	0.00	0.00		
	0.00			
(from Schedule H3)	0.00	0.00		
	0.00	0.00		
evin Funds (from Schedule H5)	0.00	0.00		
otal Transfers (add 18(a) and 18(b))	0.00	0.00		
	Political Party Committees	Than Political Committees (i) Itemized (use Schedule A)		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Operating Expenditures: (a) Allocated Federal/Non-Federal		Calcillati i Cal-to-Date		
Activity (from Schedule H4)				
(i) Federal Share	0.00	0.00		
(I)	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating	0.00	0.00		
Expenditures(c) Total Operating Expenditures	0.00	0.00		
(add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00		
Transfers to Affiliated/Other Party				
Committees	0.00	0.00		
Contributions to Federal Candidates/Committees				
and Other Political Committees	58500.00	452500.00		
Independent Expenditures				
(use Schedule E)	0.00	0.00		
Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00			
(use Schedule F)	0.00	0.00		
Lean Danaymenta Mada	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loans Made	0.00	0.00		
Refunds of Contributions To:				
(a) Individuals/Persons Other Than Political Committees	0.00	5.00		
-				
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees				
(such as PACs)	0.00	0.00		
(I) T. I O . II II . B (. I				
(d) Total Contribution Refunds	0.00	5.00		
(add Lines 28(a), (b), and (c))▶	7	0.00		
Other Disbursements	0.00	0.00		
Other Dispursements	0.00	7 7		
Federal Election Activity (2 U.S.C. §431(20))				
(a) Allocated Federal Election Activity				
(from Schedule H6)				
(i) Federal Share	0.00	0.00		
	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely	0.00	0.00		
With Federal Funds(c) Total Federal Election Activity (add	0.00	9 9		
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
	7	7		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	58500.00	452505.00		
_				
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	58500.00	452505.00		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	53738.06	427531.72
4. Total Contribution Refunds (from Line 28(d))	0.00	5.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	53738.06	427526.72
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE	6	OF	44	
l	(che	ck only	or	ne)					
	X	11a		11b		11c	12	2	
		13		14		15	16	3	17

	statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full)	Delition A. C. C. C.	
American Council of Life Insur	ers Political Action Committee	
Full Name (Last, First, Middle Initial) Tommie Brooks		Date of Receipt
Mailing Address 3126 211th Ave NE		09 082015
City	State Zip Code	Transaction ID: 67770693
Sammamish	WA 98074-6331	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
Symetra Financial Corporation	Chief Actuary, SVP	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Ted M Johnson		Date of Receipt
Mailing Address 3107 SW 31st Place		M M / D D / Y Y Y Y Y
City	State Zip Code	09 08 2015
Des Moines	IA 50321-1954	Transaction ID : 67770694 Amount of Each Receipt this Period
	0302.100.	Amount of Each neceipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation]
American Equity Investment Life Insura	CFO & Treasurer]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) 3. Bruce D Cheek		Date of Receipt
Mailing Address 6030 Gear St		09 08 2015
City	State Zip Code	Transaction ID : 67770695
Prole	IA 50229-9044	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	-
American Equity Investment Life Insura	EVP & COO	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		1250.00
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: **PAGE** 7 OF 44 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Mr. David J. Noble Date of Receipt Mailing Address 6000 Weston Parkway Suite 440 2015 09 08 City State Zip Code Transaction ID: 67770696 West Des Moines IΑ 50266-7711 Amount of Each Receipt this Period FEC ID number of contributing C 2500.00 federal political committee. Name of Employer Occupation Chr. President & CEO American Equity Investment Life Insura Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jeff Lorenzen Date of Receipt Mailing Address 5200 Woodland Ave 09 80 2015 City State Zip Code Transaction ID: 67770950 IΑ Des Moines 50312-1944 Amount of Each Receipt this Period FEC ID number of contributing C 750.00 federal political committee. Name of Employer Occupation American Equity Investment Life Insura Chief Investment Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ron J Grensteiner Date of Receipt Mailing Address 4637 91st St 09 80 2015 City State Zip Code Transaction ID: 67770952 IΑ Urbandale 50322-6236 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation President American Equity Investment Life Insura Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 3750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE	8	OF	44
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	Statements may not be sold or used by any persite name and address of any political committee to	
NAME OF COMMITTEE (In Full)	Deliate at Author Commission	
American Council of Life Insure	ers Political Action Committee	
Full Name (Last, First, Middle Initial) John M Matovina		Date of Receipt
Mailing Address 6524 NW 93rd St		09 08 2015
City	State Zip Code	Transaction ID: 67770954
Johnston	IA 50131-2954	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	3000.00
Name of Employer	Occupation	
American Equity Investment Life Insura	CEO & President	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	3000.00	
Full Name (Last, First, Middle Initial) Mr. Dennis L. Johnson FLMI, CLU		Date of Receipt
Mailing Address 926 W. Oakhampton Drive		09 08 _2015 _
City	State Zip Code	09 08 2015 Transaction ID : 67770965
Eagle	ID 83616-6744	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	2500.00
Name of Employer	Occupation	
United Heritage Life Insurance Company	President & CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2500.00	
	2500.00	
Full Name (Last, First, Middle Initial) C. Mr. Michael G. DeKoning		Date of Receipt
Mailing Address 56 Perimeter Center East Suite 5000		09 08 _ 2015 _
City	State Zip Code	Transaction ID : 67770966
Atlanta	GA 30346-2296	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2500.00
Name of Employer	Occupation	
Munich American Reassurance Company	President & Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	2500.00	
SUBTOTAL of Receipts This Page (optional)		8000.00
TOTAL This Period (last page this line number	only)	

Use separate schedule(s) for each category of the Detailed Summary Page

ı	FOR LINE NUMBER:					PAGE	-	9	OF		44
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l		13		14		15		16	;		17

	d Statements may not be sold or used by any pers the name and address of any political committee t	
NAME OF COMMITTEE (In Full)	D. P. C. C.	
American Council of Life Insui	rers Political Action Committee	
Full Name (Last, First, Middle Initial) • William R Kunkel		Date of Receipt
Mailing Address 421 Blackstone		09 08 2015
City	State Zip Code	Transaction ID: 67774734
La Grange	IL 60525-6101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
American Equity Investment Life Insura	EVP & General Counsel	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Ms. Debbie Richardson		Date of Receipt
Mailing Address 3420 East 38th Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	09 08 2015 Transaction ID : 67774740
Des Moines	IA 50317-5810	Amount of Each Receipt this Period
FEC ID number of contributing	00011 0010	
federal political committee.	C	500.00
Name of Employer	Occupation	7
American Equity Investment Life Insura	Executive Vice President & Secretary]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	0.0	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) C. Evertt W Kunzelman		Date of Receipt
Mailing Address 1200 Jorie Blvd		09 18 2015
City	State Zip Code	Transaction ID : 67774741
Oak Brook	IL 60523-2218	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	-
Mutual Trust Life Insurance Company	VP & Executive UW	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	500.00	
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		1250.00
		7 1 7 1 7
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 10 OF (check only one) X 11a 11b 12 11c

44 Use separate schedule(s) for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Kevin T Reynolds Date of Receipt Mailing Address 600 Dresher Road 2015 09 29 City Zip Code State Transaction ID: 68131098 PΑ Horsham 19044-2204 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation Chief Legal Officer Penn Mutual Life Insurance Company, Th Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jean-Francois Poulin Date of Receipt Mailing Address 1787 Sentry Parkway West Suite 420 09 29 2015 City State Zip Code **Transaction ID: 68131101** Blue Bell PA 19422-2200 Amount of Each Receipt this Period FEC ID number of contributing 2500.00 federal political committee. Name of Employer Occupation London Life Reinsurance Company President Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Eugene Choate Date of Receipt Mailing Address 4370 Peachtree Road, NE 09 29 2015 City Zip Code State Transaction ID: 68131103 GA Atlanta 30319-3054 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation President Bankers Fidelity Life Insurance Compan Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 4500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE 11 Use separate schedule(s) (check only one) X 11a 11b 11c

OF

44

for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Jonathan Renfrew Date of Receipt Mailing Address 101 Constitution Ave, NW Suite 705 East 30 2015 09 City Zip Code State Transaction ID: 68131104 DC Washington 20001-2128 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Vice President, Federal Affairs Guardian Life Insurance Company of Ame Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr Bradford Leigh Hewitt Date of Receipt Mailing Address 110 Peninsula Rd. 09 30 2015 City State Zip Code Transaction ID: 68131106 Medicine Lake MN 55441-4112 Amount of Each Receipt this Period FEC ID number of contributing 2500.00 federal political committee. Name of Employer Occupation Thrivent Financial For Lutherans CEO & President Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Jennifer Mullin Date of Receipt Mailing Address 10710 Greenspring Ave. 30 2015 09 City Zip Code State Transaction ID: 68131107 MD Lutherville 21093-3602 Amount of Each Receipt this Period FEC ID number of contributing 2500.00 С federal political committee. Name of Employer Occupation Homemaker Homemaker Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) 5500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE 12 OF 44 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Ms. D.J. Saltsman Date of Receipt Mailing Address 3852 Hallman Avenue 2015 09 29 City Zip Code State Transaction ID: 68135056 PΑ Collegeville 19426-1026 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Vice President, A&H Canada Life Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Raymond J. Hazel Date of Receipt Mailing Address 7 Daydilly Court 09 29 2015 City State Zip Code Transaction ID: 68135112 DE Wilmington 19808-1951 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation London Life Reinsurance Company Sr. V.P. Finance & CFO Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Gary T. Huffman Date of Receipt Mailing Address 187 Congress Run Road 2015 09 02 City Zip Code State Transaction ID: 68172908 OH Cincinnati 45215-5001 Amount of Each Receipt this Period FEC ID number of contributing 5000.00 С federal political committee. Name of Employer Occupation President & Chief Operating Officer Ohio National Life Insurance Company P Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) 5550.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 13 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

44

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Paige S Freeman Date of Receipt Mailing Address 988 Wildwood Rd NE 2015 09 02 City Zip Code State Transaction ID: 68172959 GΑ Atlanta 30306-3015 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation SVP and General Counsel Munich American Reassurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Donald L. Walker Date of Receipt Mailing Address 101 Constitution Ave, NW Suite 700 09 30 2015 City State Zip Code Transaction ID: PR1156427142982 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation American Council of Life Insurers SVP, Administration & CFO Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Semi-Monthly) 900.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Mandana Parsazad Date of Receipt Mailing Address 1914 Horse Shoe Drive 30 09 2015 City Zip Code State Transaction ID: PR1481799842982 Vienna VA 22182-3755 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation American Council of Life Insurers Senior Counsel, Taxes & Retirement Sec Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$25.00 Semi-Monthly) 450.00 Other (specify) 1150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 -

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		13		14		15		16		17

NAME OF COMMITTEE (In Full) American Council of Life Insure	ers Political Action Committee	
Full Name (Last, First, Middle Initial) Mr. Scott E. Smith		Date of Receipt
Mailing Address 19 Cardinal Way		09 30 2015
City	State Zip Code	Transaction ID : PR1503555342982
South Windsor	CT 06074-3745	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer	Occupation	1
Vantis Life Insurance Company	Senior Vice President & COO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	P/R Deduction (\$20.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) Ms. Kathleen F. Kiernan		Date of Receipt
Mailing Address 101 Constitution Ave, NW		M = M / D = D / Y = Y = Y
Suite 700 City	State Zip Code	09 30 2015
	State Zip Code DC 20001-2140	Transaction ID : PR1728112742982
Washington	20001-2140	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	160.00
Name of Employer	Occupation	1
American Council of Life Insurers	Sr. Counsel, State Relations]
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1440.00	P/R Deduction (\$80.00 Semi-Monthly)
Full Name (Last, First, Middle Initial) . Ms. Carolyn C. Cobb		Date of Receipt
Mailing Address 101 Constitution Ave, NW Suite 700		09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Washington	State Zip Code DC 20001-2133	Transaction ID : PR1821819642982 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	237.30
Name of Employer	Occupation	1
American Council of Life Insurers	Vice President & Associate General Cou	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	2135.69	P/R Deduction (\$118.65 Semi-Monthly)
SUBTOTAL of Receipts This Page (optional)		437.30
TOTAL This Period (last page this line number	<u> </u>	

FOR LINE NUMBER: PAGE 15 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

44

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) The Honora Dirk A. Kempthorne Date of Receipt Mailing Address 101 Constitution Ave, NW Suite 700 30 2015 City Zip Code State Transaction ID: PR1871324542982 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 416.66 federal political committee. Name of Employer Occupation President and CEO American Council of Life Insurers Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$208.33 Semi-Monthly) 3749.94 Other (specify) Full Name (Last, First, Middle Initial) B. Lisa Smith Date of Receipt Mailing Address 800 North Magnolia Ave. Suite 1400 09 30 2015 City State Zip Code Transaction ID: PR1871488842982 FL Orlando 32803-3248 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation Hannover Life Reassurance Company of A Manager Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Semi-Monthly) 360.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Brian Waidmann Date of Receipt Mailing Address 101 Constitution Ave, NW 30 09 2015 Suite 700 City Zip Code State Transaction ID: PR1872428342982 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 400.00 С federal political committee. Name of Employer Occupation Chief of Staff American Council of Life Insurers Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$200.00 Semi-Monthly) 3600.00 Other (specify) 856.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

FOR LINE NUMBER: PAGE 16 OF 44 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Mr. Peter J. Bautz Date of Receipt Mailing Address 101 Constitution Ave, NW Suite 700 30 2015 City Zip Code State Transaction ID: PR1903849842982 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation Vice President, Taxes and Retirement S American Council of Life Insurers Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Semi-Monthly) 360.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jim Pyc Date of Receipt Mailing Address 9124 MidPines Court 09 30 2015 City State Zip Code Transaction ID: PR1948888442982 FL Orlando 32819-4307 Amount of Each Receipt this Period FEC ID number of contributing 24.00 federal political committee. Name of Employer Occupation Hannover Life Reassurance Company of A EVP, financial Solutions Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$12.00 Semi-Monthly) 216.00 Other (specify) Full Name (Last, First, Middle Initial) c. William R Hobbs Date of Receipt Mailing Address 13005 Windsor Circle 30 09 2015 City State Zip Code Transaction ID: PR1964225742982 KS Leawood 66209-1793 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation **VP Finance** Fidelity Security Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$25.00 Semi-Monthly) 450.00 Other (specify) 114.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 17 OF 44 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Anita Peduzzi Date of Receipt Mailing Address 101 Constitution Avenue Suite 700 W 30 2015 City Zip Code State Transaction ID: PR1978714942982 DC Washington 20001-2146 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation **PAC Director** American Council of Life Insurers Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$41.67 Semi-Monthly) 750.06 Other (specify) Full Name (Last, First, Middle Initial) B. Joshua T. Mauthe Date of Receipt Mailing Address 2210 12th St NW 09 30 2015 City State Zip Code Transaction ID: PR1978715642982 DC Washington 20009-4404 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation American Council of Life Insurers Meeting Planner-Special Projects Coord Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Semi-Monthly) 360.00 Other (specify) Full Name (Last, First, Middle Initial) c. Seaver J. J Sowers Date of Receipt Mailing Address 101 Constitution Avenue NW 30 09 2015 City Zip Code State Transaction ID: PR2018796042982 DC Washington 20001-2140 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation Director, Federal Relations American Council of Life Insurers Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$15.00 Semi-Monthly) 270.00 Other (specify) 153.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

	FOF	R LINE	NU	PAGE	•	18 O	F	44		
Use separate schedule(s)	(che	ck only	or or	ne)						
for each category of the Detailed Summary Page		11a		11b		11c		12		
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NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Full Name (Last, First, Middle Initial) Maria Lauterette Mailing Address 800 N Magnolia Avenue Suite 1400 City Orlando State FL	Date of Receipt O9 30 2015 Zip Code 32803-3248 Transaction ID : PR2019035342982 Amount of Each Receipt this Period
Maria Lauterette Mailing Address 800 N Magnolia Avenue Suite 1400 City State Orlando FL	Zip Code
Suite 1400 City State Orlando FL	Zip Code Transaction ID : PR2019035342982 32803-3248 Amount of Each Receipt this Period
City State Orlando FL	Zip Code Transaction ID : PR2019035342982 32803-3248 Amount of Each Receipt this Period
Orlando FL	32803-3248 Amount of Each Receipt this Period
550 ID 1 (1 ii ii	
FEC ID number of contributing federal political committee.	80.00
Name of Employer Occupation	
Hannover Life Reassurance Company of A VP, Human R	esources
Receipt For: Primary General Other (specify) ▼ Aggregate Ye	P/R Deduction (\$40.00 Semi-Monthly)
Full Name (Last, First, Middle Initial) Jessica M. M Hanson	Date of Receipt
Mailing Address 1707 Prince St.	M = M / D = D / Y = Y = Y
#2 City State	7
Alexandria VA	22314-2804 Transaction ID: PR2023274642982 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	83.40
Name of Employer Occupation American Council of Life Insurers Vice President	t, Communications
Receipt For: Primary General Other (specify) ▼ Aggregate Ye	P/R Deduction (\$41.70 Semi-Monthly)
Full Name (Last, First, Middle Initial) Mariana E. E Gomez	Date of Receipt
Mailing Address 101 Constitution Avenue NW Suite 700	09 30 Y Y Y Y Y
City State Washington DC	Zip Code
FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period 30.00
Name of Employer Occupation	
American Council of Life Insurers Counsel	
Receipt For: Aggregate Ye	ear-to-Date ▼
Primary General Other (specify) ▼	P/R Deduction (\$15.00 Semi-Monthly)
SUBTOTAL of Receipts This Page (optional)	193.40

	FOF	R LINE	NU	MBER	PAGE 19 OF			-	44	
Use separate schedule(s)	(che	ck only	or or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
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Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used by any per he name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Council of Life Insur	rers Political Action Committee	
Full Name (Last, First, Middle Initial) Lemily C. C Micale		Date of Receipt
Mailing Address 101 Constitution Avenue N	N	M = M / D = D / Y = Y = Y
Suite 700 City	State Zip Code	09 30 2015 Taxwardin IP PRO1000000000000000000000000000000000000
Washington	DC 20001-2133	Transaction ID : PR2122882042982 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer	Occupation	+
American Council of Life Insurers	Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	P/R Deduction (\$25.00 Semi-Monthly)
Full Name (Last, First, Middle Initial) James Szostek	•	Date of Receipt
Mailing Address 101 Constitution Avenue NV Suite 700		09 30 2015
City	State Zip Code DC 20001-2133	Transaction ID : PR2122891042982
Washington	DC 20001-2133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	1
American Council of Life Insurers	Public Policy	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	P/R Deduction (\$25.00 Semi-Monthly)
Full Name (Last, First, Middle Initial) Line F. F Steger		Date of Receipt
Mailing Address 101 Constitution Avenue N Suite 700		09 30 2015
City Washington	State Zip Code DC 20001-2133	Transaction ID : PR2160513742982
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 50.00
Name of Employer	Occupation	+
American Council of Life Insurers	Legislative Analyst	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	450.00	P/R Deduction (\$25.00 Semi-Monthly)
SUBTOTAL of Receipts This Page (optional).		150.00
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 20 OF 44 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Bruce Friedland Date of Receipt Mailing Address 200 Day Hill Road 30 2015 City State Zip Code Transaction ID: PR2285776942982 CT Windsor 06095-1779 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation SVP & Chief Actuary Vantis Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Gail Lataille Date of Receipt Mailing Address 256 Stanley Dr 09 30 2015 City State Zip Code Transaction ID: PR2285777142982 CT Glastonbury 06033-2622 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation Vantis Life Insurance Company **SVP & Treasurer** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 400.00 Other (specify) Full Name (Last, First, Middle Initial) c. Edmund Mahoney Date of Receipt Mailing Address 20 Northgate 30 09 2015 City State Zip Code Transaction ID: PR2285777342982 CT Simsbury 06070-1021 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation SVP Vantis Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 400.00 Other (specify) 120.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

	FOR	LINE N	1UN	/IBER:	PAGE	2	21 O	·F	44
Use separate schedule(s)	(chec	k only	one	e)					
for each category of the Detailed Summary Page		11a	7	11b	11c		12		
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	urers Political Action Committee	
Full Name (Last, First, Middle Initial) Craig Simms		Date of Receipt
Mailing Address 200 Day Hill Road		09 30 _ 2015 _
City	State Zip Code	Transaction ID : PR2285777742982
Windsor	CT 06095-1779	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	40.00
Name of Employer	Occupation	\dashv
Vantis Life Insurance Company	SVP	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	Aggregate rear-to-Date ▼	P/R Deduction (\$20.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) Richard Spencer, III	·	Date of Receipt
Mailing Address 4300 Carriage Ct		09 30 2015
City	State Zip Code	Transaction ID : PR2285778242982
Kensington	MD 20895-3615	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	22.00
Name of Employer	Occupation	_
Baltimore Life Insurance Company	VP & Controller	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	220.00	P/R Deduction (\$11.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) Peter Tedone		Date of Receipt
Mailing Address 32 Lincoln Lane		09 30 2015
City	State Zip Code	Transaction ID : PR2285778842982
Weatogue	CT 06089-9780	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.60
Name of Employer	Occupation	_
Vantis Life Insurance Company	President & CEO	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General		P/R Deduction (\$20.80 Bi-Weekly)
Other (specify) ▼	395.20	
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	FOF	R LINE	NU	MBER	PAGE 22 OF				44	
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for each category of the Detailed Summary Page	X	11a		11b		11c		12		
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	Statements may not be sold or used by any perse name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Council of Life Insure	ers Political Action Committee	
Full Name (Last, First, Middle Initial) Larry D. D. Burton		Date of Receipt
Mailing Address 101 Constitution Ave, NW		M = M / D = D / Y = Y = Y
Suite 700	Olata 7'- O-1-	09 30 2015
City	State Zip Code DC 20001-2133	Transaction ID : PR2348687342982
Washington	DC 20001-2133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	416.66
Name of Employer	Occupation	
American Council of Life Insurers	Chief Operating Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 416.66	P/R Deduction (\$208.33 Semi-Monthly)
Full Name (Last, First, Middle Initial) 3. Mr. Gary E. Hughes		Date of Receipt
Mailing Address 101 Constitution Avenue, NW		M = M / D = D / Y = Y = Y
Suite 700 West City	State Zip Code	09 30 2015
Unity Washington	DC 20001-2133	Transaction ID : PR771358242982
	20001-2133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	366.62
Name of Employer	Occupation	
American Council of Life Insurers	Executive Vice President & General Cou	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	3299.58	P/R Deduction (\$183.31 Semi-Monthly)
Full Name (Last, First, Middle Initial) C. Ms. Linda H. Cunningham		Date of Receipt
Mailing Address 101 Constitution Avenue, NW Suite 700 West		09 30 2015
City	State Zip Code	Transaction ID : PR771362442982
Washington	DC 20001-2133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	119.66
Name of Employer	Occupation	
American Council of Life Insurers	Vice President, Conference Development	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	riggiogate four to Bute ₹	P/R Deduction (\$59.83 Semi-Monthly)
Other (specify) ▼	1076.95	· · · · · · · · · · · · · · · · · · ·
SUBTOTAL of Receipts This Page (optional)	•	902.94
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 23 OF 44 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Mr. Damian Salvi Date of Receipt Mailing Address 10075 Red Run Boulevard 30 2015 City Zip Code State Transaction ID: PR771364142982 MD Owings Mills 21117-4865 Amount of Each Receipt this Period FEC ID number of contributing 24.00 federal political committee. Name of Employer Occupation Vice President Baltimore Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$12.00 Bi-Weekly) 240.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. John F. Dolan Date of Receipt Mailing Address 101 Constitution Ave, NW Suite 700 West 09 30 2015 City State Zip Code Transaction ID: PR771365442982 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 60.00 federal political committee. Name of Employer Occupation American Council of Life Insurers Vice President, Media Relations Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Semi-Monthly) 540.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. J. Bruce Ferguson Date of Receipt Mailing Address 101 Constitution Avenue, NW 30 Suite 700 West 09 2015 City Zip Code State Transaction ID: PR771373242982 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 316.44 С federal political committee. Name of Employer Occupation Senior Vice President, State Relations American Council of Life Insurers Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$158.22 Semi-Monthly) 2847.97 Other (specify) 400.44 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

9

- 9

	FOF	R LINE	NU	IMBER	PAGE 24 OF				44	
Use separate schedule(s)	(che	ck only	or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any per- ne name and address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Council of Life Insure	ers Political Action Committee	
Full Name (Last, First, Middle Initial) Mr. David M. Leifer		Date of Receipt
Mailing Address 101 Constitution Avenue, NV Suite 700 West	N	09 30 2015
City	State Zip Code	Transaction ID : PR771374042982
Washington	DC 20001-2133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	177.58
Name of Employer	Occupation	-
American Council of Life Insurers	Vice President & Associate General Cou	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1598.23	P/R Deduction (\$88.79 Semi-Monthly)
Full Name (Last, First, Middle Initial) Mr. James D. Hall	•	Date of Receipt
Mailing Address 101 Constitution Avenue, NV Suite 700 West	V	09 30 2015
City	State Zip Code	Transaction ID : PR771374342982
Washington	DC 20001-2133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer American Council of Life Insurers	Occupation Regional Vice President, State Relatio	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	P/R Deduction (\$15.00 Semi-Monthly)
Full Name (Last, First, Middle Initial) C. Mr. C. Bryan Cox		Date of Receipt
Mailing Address 101 Constitution Avenue, NV Suite 700 West		09 30 2015
City Washington	State Zip Code DC 20001-2133	Transaction ID : PR771376842982
FEC ID number of contributing federal political committee.	C 20001-2133	Amount of Each Receipt this Period 60.14
Name of Employer	Occupation	
American Council of Life Insurers	Regional Vice President, State Relatio	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	541.25	P/R Deduction (\$30.07 Semi-Monthly)
SUBTOTAL of Receipts This Page (optional)		267.72
TOTAL This Period (last page this line numbe	r only)	

FOR LINE NUMBER: PAGE 25 OF 44 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Mr. John W. Mangan CEBS Date of Receipt Mailing Address 101 Constitution Ave, NW Suite 700 30 2015 City Zip Code State Transaction ID: PR771377142982 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation American Council of Life Insurers Regional Vice President, State Relatio Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Semi-Monthly) 1800.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Paul S. S. Graham III Date of Receipt Mailing Address 101 Constitution Avenue NW Suite 700 09 30 2015 City State Zip Code Transaction ID: PR771412642982 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation American Council of Life Insurers SVP, Insurance Regulation & Chief Actu Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Semi-Monthly) 360.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Morris R. Goff Date of Receipt Mailing Address 101 Constitution Avenue, NW 30 Suite 700 West 09 2015 City Zip Code State Transaction ID: PR771419342982 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 208.58 С federal political committee. Name of Employer Occupation American Council of Life Insurers Vice President, Federal Relations Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$104.29 Semi-Monthly) 1877.22 Other (specify) 448.58 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

FOR LINE NUMBER: PAGE 26 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

44

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Ms. Brenda S. Nation Date of Receipt Mailing Address 101 Constitution Avenue, NW Suite 700 West 30 2015 City Zip Code State Transaction ID: PR771419942982 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 150.00 federal political committee. Name of Employer Occupation American Council of Life Insurers Regional Vice President, State Relatio Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$75.00 Semi-Monthly) 1350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Debra K. West Date of Receipt Mailing Address 101 Constitution Avenue, NW Suite 700 West 09 30 2015 City State Zip Code Transaction ID: PR771421042982 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation American Council of Life Insurers Regional Vice President, State Relatio Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Semi-Monthly) 900.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Michael Lovendusky Date of Receipt Mailing Address 101 Constitution Ave, NW 30 09 2015 Suite 700 City Zip Code State Transaction ID: PR771421142982 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation American Council of Life Insurers Vice President & Associate General Cou Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Semi-Monthly) 360.00 Other (specify) 290.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

	FOF	R LINE	NU	IMBER	:	PAGE	2	27 OI	F	44
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for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		117

	d Statements may not be sold or used by any pers the name and address of any political committee t	
NAME OF COMMITTEE (In Full) American Council of Life Insu	rers Political Action Committee	
Full Name (Last, First, Middle Initial) Mr. Jeffry J. Janoska		Date of Receipt
Mailing Address 101 Constitution Avenue, N Suite 700		09 30 2015
City	State Zip Code	Transaction ID : PR771423142982
Washington	DC 20001-2133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.60
Name of Employer	Occupation	
American Council of Life Insurers	Senior Policy Analyst	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.41	P/R Deduction (\$12.80 Semi-Monthly)
Full Name (Last, First, Middle Initial) Ms. Lisa J. Tate		Date of Receipt
Mailing Address 101 Constitution Avenue, N Suite 700		09 30 / Y = Y = Y = Y
City	State Zip Code	Transaction ID : PR771423242982
Washington	DC 20001-2133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	80.00
Name of Employer American Council of Life Insurers	Occupation VP, Litigation & Assoc. Gen. Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 720.00	P/R Deduction (\$40.00 Semi-Monthly)
Full Name (Last, First, Middle Initial) C. Mr. John P. John P. Gerni	<u>'</u>	Date of Receipt
Mailing Address 101 Constitution Ave, NW Suite 700		09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Washington	State Zip Code DC 20001-2133	Transaction ID : PR771428742982
	20001-2133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer	Occupation	1
American Council of Life Insurers	Regional Vice President, State Relatio	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1350.00	P/R Deduction (\$75.00 Semi-Monthly)
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	255.60
TOTAL This Period (last page this line numb	er only)	

FOR LINE NUMBER: PAGE 28 OF 44 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Mr. David C. Turner Date of Receipt Mailing Address 101 Constitution Ave, NW Suite 700 30 2015 City Zip Code State Transaction ID: PR771428942982 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 277.46 federal political committee. Name of Employer Occupation EVP, Chief of Staff & Corp. Secretary American Council of Life Insurers Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$138.73 Semi-Monthly) 2497.13 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Kynondo Lewis Date of Receipt Mailing Address 101 Constitution Ave, NW Suite 700 09 30 2015 City State Zip Code Transaction ID: PR771439642982 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 23.76 federal political committee. Name of Employer Occupation American Council of Life Insurers Legal Editor Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$11.88 Semi-Monthly) 213.83 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Alane R. Dent Date of Receipt Mailing Address 101 Constitution Ave, NW 30 09 2015 Suite 700 City Zip Code State Transaction ID: PR771444342982 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 203.76 С federal political committee. Name of Employer Occupation American Council of Life Insurers Vice President, Federal Relations Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$101.88 Semi-Monthly) 1833.84 Other (specify) 504.98 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

FOR LINE NUMBER: PAGE 29 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

44

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Mr. Thomas Scott Dixon Date of Receipt Mailing Address 101 Constitution Avenue NW Suite 700 West 30 2015 City Zip Code State Transaction ID: PR771444942982 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation American Council of Life Insurers Finance Director Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Semi-Monthly) 360.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Andrew M. Melnyk Date of Receipt Mailing Address 101 Constitution Avenue NW Suite 700 09 30 2015 City State Zip Code Transaction ID: PR771445842982 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 42.54 federal political committee. Name of Employer Occupation American Council of Life Insurers Managing Director, Research Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$21.27 Semi-Monthly) 382.87 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Julie A. Spiezio Date of Receipt Mailing Address 101 Constitution Avenue NW 30 09 2015 Suite 700 City Zip Code State Transaction ID: PR771449642982 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Senior Vice President American Council of Life Insurers Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$50.00 Semi-Monthly) 900.00 Other (specify) 182.54 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

FOR LINE NUMBER: PAGE 30 OF 44 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Mr. John K. Bruins Date of Receipt Mailing Address 101 Constitution Avenue NW Suite 700 2015 30 City Zip Code State Transaction ID: PR771450142982 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing C 35.52 federal political committee. Name of Employer Occupation American Council of Life Insurers Senior Actuary Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$17.76 Semi-Monthly) 319.68 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Maurice A. Perkins Date of Receipt Mailing Address 101 Constitution Ave, NW Suite 700 09 30 2015 City State Zip Code Transaction ID: PR805149142982 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 416.66 federal political committee. Name of Employer Occupation American Council of Life Insurers Vice President, Federal Relations Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$208.33 Semi-Monthly) 3749.94 Other (specify) Full Name (Last, First, Middle Initial) **c.** Mr. Wayne A. Mehlman Date of Receipt Mailing Address 101 Constitution Avenue, NW 09 30 2015 Suite 700 City Zip Code State Transaction ID: PR904819542982 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation American Council of Life Insurers Counsel, Insurance Regulation Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$25.00 Semi-Monthly) 450.00 Other (specify) 502.18 SUBTOTAL of Receipts This Page (optional)..... 36833.28 TOTAL This Period (last page this line number only).....

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 OF 44 (check only one) 11a
	y information copied from such Reports and Sta for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American Council of Life Insurer	s Politica	al Action Committee	
Α.	Full Name (Last, First, Middle Initial) Nationwide Mutual Insurance Co. Fina	ncial & Inv	estments PAC	Date of Receipt
	Mailing Address One Nationwide Plaza 1-32-301			09 23 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State OH	Zip Code 43215	Transaction ID: 67770970
	Columbus FEC ID number of contributing federal political committee.		43215 0406215	Amount of Each Receipt this Period 2500.00
	Name of Employer	Occupation		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2500.00	
— В.	Full Name (Last, First, Middle Initial) Liberty Mutual Insurance Company -	PAC		Date of Receipt
	Mailing Address 175 Berkeley Street			09 30 / Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 68135823
	Boston	MA	02117	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C co	0171843	5000.00
	Name of Employer	Occupation		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00	
— С.	Full Name (Last, First, Middle Initial) Ohio National Financial Services Ir	nc. PAC		Date of Receipt
•	Mailing Address One Financial Way			09 02 2015
	City Cincinnati	State OH	Zip Code 45242	Transaction ID : 68172907 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C co	0296657	5000.00
	Name of Employer	Occupation	l	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00	
s	UBTOTAL of Receipts This Page (optional)			12500.00

TOTAL This Period (last page this line number only).....

12500.00

CHEDULE B (FEC Form 3X)			MDED. PAGE 32 OF 44						
`	Use separate schedule(s)	-	LINE NUMBER: PAGE 32 OF 44						
EMIZED DISBURSEMENTS	for each category of the	(check only							
	Detailed Summary Page	21b	22 X 23 24 25 26						
		27	28a 28b 28c 29 30b						
ny information copied from such Reports and State	ments may not be sold or use	d by any perso	on for the purpose of soliciting contributions						
for commercial purposes, other than using the nar	me and address of any politica	al committee to	solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
American Council of Life Insurers	Political Action Comm	nittee							
Timorican Council of Life mourers		IIII							
Full Name (Last, First, Middle Initial)									
Fearless PAC			Date of Disbursement						
1 34.1333 1 7 13			M M / D D / Y Y Y Y						
Mailing Address PO Box 37			09 08 2015						
City	State Zip Code								
Boulder	CO 80306		Transaction ID: 67533647						
Purpose of Disbursement									
Political Contribution		011	Amount of Each Disbursement this Period						
Candidate Name		Cotogony							
Fearless PAC		Category/ Type	2000.00						
	ment For:	- 750							
Senate	Primary General		Political Contribution						
President	Other (specify)		Fontical Continuation						
State: District:	Other (specify)								
Full Name (Last, First, Middle Initial)			Data of Distance and						
Schock For Congress			Date of Disbursement						
			M = M / D = D / Y = Y = Y						
Mailing Address PO Box 10555			09 11 2015						
011	7: 0 1								
•	State Zip Code		Transaction ID: 67550195						
Peoria Purpose of Disbursement	IL 61612								
Void - Schock For Congress check issued 02/23/1	5	011	Amount of Each Disbursement this Period						
Candidate Name		011	Amount of Lacif Disbursement this Feriod						
Rep. Aaron Schock		Category/	-2500.00						
	ment For: 2016	Туре							
Senate	Primary General		Void - Schock For Congress check issued 02/23						
President	Other (specify) ▼								
State: IL District: 18									
Full Name (Last, First, Middle Initial)									
Charles Boustany Jr Md For Cong	ress Inc		Date of Disbursement						
, ,			M M / D D / Y Y Y Y						
Mailing Address Post Office Box 80126			09 22 2015						
City	State Zip Code		Transaction ID : 67748482						
Lafayette	LA 70598								
Purpose of Disbursement Political Contribution									
		011	Amount of Each Disbursement this Period						
Candidate Name		Category/	1000.00						
Rep. Charles Boustany Jr.		Type	1000.00						
	ment For: 2016		7						
Office Sought:			Political Contribution						
Office Sought: House Disburse	Primary General		. JIIOGI GOTILIIDGIIOTI						
	Other (specify)								
Senate President	,								
Senate President	,								
Senate President	Other (specify)		500.00						

ITI		Use separate schedule(s)	I	FOR LINE NUMBER: PAGE 33 OF 44					
_	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b					
	y information copied from such Reports and Statem for commercial purposes, other than using the nam								
	NAME OF COMMITTEE (In Full) American Council of Life Insurers F	olitical Action Com	mittee						
	Full Name (Last, First, Middle Initial)								
Α.	Tom Reed For Congress Mailing Address P.O. Box 10847			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	Rochester	State Zip Code NY 14610		Transaction ID: 67748483					
	Purpose of Disbursement Political Contribution		011	Amount of Each Disbursement this Period					
	Candidate Name Rep. Tom Reed		Category/ Type	5000.00					
	Senate President	nent For: 2016 Primary General Other (specify)		Political Contribution					
_	State: NY District: 23 Full Name (Last, First, Middle Initial)								
B.	Terri Sewell For Congress			Date of Disbursement					
	Mailing Address P.O. Box 1964			09 22 2015					
	Birmingham	State Zip Code AL 35201		Transaction ID : 67748537					
	Purpose of Disbursement Political Contribution		011	Amount of Each Disbursement this Period					
	Candidate Name Rep. Terri Sewell		Category/ Type	1500.00					
	Senate	nent For: 2016 Primary General Other (specify) ▼		Political Contribution					
C.	Full Name (Last, First, Middle Initial) Ron Johnson For Senate Inc			Date of Disbursement					
	Mailing Address 219 E Washington Ave			09 22 2015					
	,	tate Zip Code WI 54901		Transaction ID : 67748539					
	Purpose of Disbursement Political Contribution		011	Amount of Each Disbursement this Period					
	Candidate Name Sen. Ron Johnson		Category/ Type	1000.00					
	X Senate	nent For: 2016 Primary General Other (specify)		Political Contribution					
s	UBTOTAL of Disbursements This Page (optional)		·····•	7500.00					

SCHEDULE B (FEC Form 3X)	Llee concrete cohedule(s)		LINE NUMBER: PAGE 34 OF 44					
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only 21b		:6				
	Detailed Summary Page	27		0b				
Any information copied from such Reports and Staten	nents may not be sold or use	ed by any perso	on for the purpose of soliciting contributions	_				
or for commercial purposes, other than using the name								
NAME OF COMMITTEE (In Full)								
American Council of Life Insurers F	Political Action Comn	nittee						
/ Full Name (Last, First, Middle Initial)		i		_				
A. French Hill For Arkansas			Date of Disbursement					
			M M / D D / Y Y Y Y					
Mailing Address PO Box 7841			09 22 2015					
City	State Zip Code							
Little Rock	AR 72217		Transaction ID: 67748543					
Purpose of Disbursement Political Contribution		011	Amount of Fook Dishurosment this Device					
Candidate Name		011	Amount of Each Disbursement this Period	-				
Rep. French Hill		Category/ Type	2500.00					
•	nent For: 2016	71	,					
Senate	Primary General		Political Contribution					
President	Other (specify)							
State: AR District: 02 Full Name (Last, First, Middle Initial)								
B. Lisa Murkowski For Us Senate			Date of Disbursement					
LISA WARROWSKI I OF US OCHARC			M M / D D / Y Y Y Y					
Mailing Address PO Box 100847			09 22 2015					
Cit.	State Zin Code							
City S Anchorage	State Zip Code AK 99510		Transaction ID: 67748665					
Purpose of Disbursement								
Political Contribution		011	Amount of Each Disbursement this Period					
Candidate Name		Category/	2000.00	1				
Con Lina Murkovaldi		Type		4				
Sen. Lisa Murkowski Office Sought: House Disburser	nent For: 2016	.,,,,,						
Office Sought: House Disburser	nent For: 2016 Primary General	.,,,,,	Political Contribution					
Office Sought: House Disburser			Political Contribution					
Office Sought: House Senate President State: AK District:	Primary General	7,7,0	Political Contribution					
Office Sought: House Senate President State: AK District: Full Name (Last, First, Middle Initial)	Primary General	3,70						
Office Sought: House Senate President State: AK District:	Primary General	7,7	Date of Disbursement					
Office Sought: House Senate President State: AK District: Full Name (Last, First, Middle Initial) C. George Holding For Congress Inc.	Primary General	3,70						
Office Sought: House Senate President State: AK District: Full Name (Last, First, Middle Initial)	Primary General	7,7-2	Date of Disbursement					
Office Sought: House Senate President State: AK District: Full Name (Last, First, Middle Initial) C. George Holding For Congress Inc. Mailing Address PO Box 97187 City	Primary General Other (specify) ▼ State Zip Code		Date of Disbursement					
Office Sought: House Senate President State: AK District: Full Name (Last, First, Middle Initial) C. George Holding For Congress Inc. Mailing Address PO Box 97187	Primary General Other (specify) ▼		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Office Sought: House Senate President State: AK District: Full Name (Last, First, Middle Initial) C. George Holding For Congress Inc. Mailing Address PO Box 97187 City Raleigh	Primary General Other (specify) ▼ State Zip Code	011	Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Office Sought: House Senate President State: AK District: Full Name (Last, First, Middle Initial) C. George Holding For Congress Inc. Mailing Address PO Box 97187 City Raleigh Purpose of Disbursement Political Contribution Candidate Name	Primary General Other (specify) ▼ State Zip Code		Date of Disbursement M M O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Office Sought: House Senate President State: AK District: Full Name (Last, First, Middle Initial) C. George Holding For Congress Inc. Mailing Address PO Box 97187 City Raleigh Purpose of Disbursement Political Contribution Candidate Name Rep. George Holding	Primary General Other (specify) ▼ State Zip Code NC 27624	011	Date of Disbursement M M / 22 / 2015 Transaction ID: 67748668]				
Office Sought: House Senate President State: AK District: Full Name (Last, First, Middle Initial) C. George Holding For Congress Inc. Mailing Address PO Box 97187 City Raleigh Purpose of Disbursement Political Contribution Candidate Name Rep. George Holding Office Sought: House Disburser	Primary General Other (specify) ▼ State Zip Code NC 27624 ment For: 2016	011 Category/	Date of Disbursement M M O 22]				
Office Sought: House Senate President State: AK District: Full Name (Last, First, Middle Initial) C. George Holding For Congress Inc. Mailing Address PO Box 97187 City Raleigh Purpose of Disbursement Political Contribution Candidate Name Rep. George Holding	Primary General Other (specify) ▼ State Zip Code NC 27624	011 Category/	Date of Disbursement M M O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y]				
Office Sought: House Senate President State: AK District: Full Name (Last, First, Middle Initial) C. George Holding For Congress Inc. Mailing Address PO Box 97187 City Raleigh Purpose of Disbursement Political Contribution Candidate Name Rep. George Holding Office Sought: House Senate Disburser	Primary General Other (specify) ▼ State Zip Code NC 27624 ment For: 2016 Primary General	011 Category/	Date of Disbursement M M O 22]				
Office Sought: House Senate President State: AK District: Full Name (Last, First, Middle Initial) C. George Holding For Congress Inc. Mailing Address PO Box 97187 City Raleigh Purpose of Disbursement Political Contribution Candidate Name Rep. George Holding Office Sought: House Senate President Disburser Disburser	Primary General Other (specify) ▼ State Zip Code NC 27624 ment For: 2016 Primary General	011 Category/	Date of Disbursement M M / 22 / 2015 Transaction ID : 67748668 Amount of Each Disbursement this Period 2500.00 Political Contribution]				
Office Sought: House Senate President State: AK District: Full Name (Last, First, Middle Initial) C. George Holding For Congress Inc. Mailing Address PO Box 97187 City Raleigh Purpose of Disbursement Political Contribution Candidate Name Rep. George Holding Office Sought: House Senate President Disburser Disburser	Primary General Other (specify) ▼ State Zip Code NC 27624 ment For: 2016 Primary General Other (specify) ▼	011 Category/ Type	Date of Disbursement M M O 22]				

2	CHEDULE B (FEC Form 3X)		_	NUMBER: PAGE 35 OF 44					
31	CHEDOLE B (FEC FOIII 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 35 OF						
IT	EMIZED DISBURSEMENTS	for each category of the	(Clieck only	· ·					
		Detailed Summary Page	21b	22 X 23 24 25 26					
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or	r for commercial purposes, other than using the nan	ne and address of any politic	cal committee to	o solicit contributions from such committee.					
$\overline{\ }$	NAME OF COMMITTEE (In Full)								
	American Council of Life Insurers F	Political Action Com	mittee						
	American Council of End modicion		micoo						
	Full Name (Last, First, Middle Initial)								
Α.	Friends Of Jim Clyburn			Date of Disbursement					
	Theriae er eini eigeann			M M / D D / Y Y Y Y					
	Mailing Address PO Box 12567			09 22 2015					
	City	State Zip Code		Transaction ID + C7740C7C					
	Columbia	SC 29211		Transaction ID: 67748676					
	Purpose of Disbursement								
	Political Contribution		011	Amount of Each Disbursement this Period					
	Candidate Name		Category/						
	Rep. James Clyburn		Type	2000.00					
	Office Sought: House Disburser	ment For: 2016							
	Senate	Primary General		Political Contribution					
	President	Other (specify)		. Simodi SSimiladiisi					
	State: SC District: 06	,							
	Full Name (Last, First, Middle Initial)								
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	Mailing Address PO Box 744			09 22 2015					
	maining / tauress O Box / 44								
	City	State Zip Code							
	Mineola	NY 11501		Transaction ID: 67748693					
	Purpose of Disbursement								
	Political Contribution		011	Amount of Each Disbursement this Period					
	Candidate Name		Category/						
	Rep. Kathleen Rice		Type	1000.00					
		ment For: 2016							
	Senate	Primary General		Political Contribution					
	President	Other (specify)		Tomical Contribution					
	State: NY District: 04	(1							
	Full Name (Last, First, Middle Initial)								
C	Ben Sasse For Us Senate Inc			Date of Disbursement					
٠.	Den Sasse For Os Senate Inc								
	Mailing Address PO Box 1976			09 22 2015					
	Maining Address 1 O Box 1970			2010					
	City	State Zip Code							
	Fremont	NE 68026		Transaction ID: 67748696					
	Purpose of Disbursement			-					
	Political Contribution		011	Amount of Each Disbursement this Period					
	Candidate Name		Catagory	Autount of Each Biobardonicht this Feriod					
	Sen. Ben Sasse		Category/ Type	2000.00					
		ment For: 2020	71						
	▼ Senate	Primary General		Political Contribution					
	President	Other (specify)		1 Satisfal Contribution					
	State: NE District:	• • • • •							
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				5000.00					
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	CHEDULE B (FEC Form 3X)	lise senar	rate schedule(s)	-	LINE NUMBER: PAGE 36 OF 44					
IT	EMIZED DISBURSEMENTS	for each c	cate scriedule(s) category of the summary Page	(check only 21b 27	22 🗶 23 🔲 24	4 25 26 8c 29 30b				
	ny information copied from such Reports and Statem for commercial purposes, other than using the nam									
	NAME OF COMMITTEE (In Full) American Council of Life Insurers P	olitical A	Action Comr	mittee						
_	Full Name (Last, First, Middle Initial)									
Α.	Lucas for Congress Mailing Address Post Office Box 1726				Date of Disbursement M M M / D D / 09 22	2015				
	Oklahoma City	otate OK	Zip Code 73101		Transaction ID: 6774	8787				
	Purpose of Disbursement Political Contribution			011	Amount of Each Disbur	sement this Period				
	Rep. Frank Lucas			Category/ Type		1000.00				
	Senate President	nent For: 20 Primary Other (speci	General		Political Contribution					
_	State: OK District: 03 Full Name (Last, First, Middle Initial)									
В.	Maloney For Congress				Date of Disbursement	Y				
	Mailing Address 49 East 92nd Street				09 22	2015				
	New York	state NY	Zip Code 10128		Transaction ID : 6774	18788				
	Purpose of Disbursement Political Contribution			011	Amount of Each Disbur	sement this Period				
	Candidate Name Rep. Carolyn Maloney			Category/ Type		1000.00				
	Office Sought: House Disbursem	nent For: 20 Primary Other (speci	General		Political Contribution					
C.	Full Name (Last, First, Middle Initial) Robert Hurt For Congress				Date of Disbursement					
	Mailing Address PO Box 8				09 22	2015				
	,	state VA	Zip Code 24531		Transaction ID : 6774	8789				
	Purpose of Disbursement Political Contribution			011	Amount of Each Disbur	sement this Period				
	Candidate Name Rep. Robert Hurt			Category/ Type		2500.00				
	Senate	nent For: 20 Primary Other (speci	General		Political Contribution	,				
H	SUBTOTAL of Disbursements This Page (optional) OTAL This Period (last page this line number only).					4500.00				

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3	CHEDULE B (FEC Form 3X)	FC				FOR LINE NUMBER: PAGE 37 OF							44		
T	EMIZED DISBURSEMENTS	Use separate schedule(s) (check for each category of the					eck only one)								
_			Summary Page			21b		22	X	23		24	25		26
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01	for commercial purposes, other than using the nam	e and add	ress of any politic	al con	arry 1mitt	tee to	solia	cit co	ntrib	utions	from	such	comm	ittee.	3
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	NAME OF COMMITTEE (In Full)			•											
/	American Council of Life Insurers P	olitical.	Action Comr	mitte	e										
<u>/</u>															
_	Full Name (Last, First, Middle Initial)														
Α.	Andy Barr For Congress, Inc.						Di	ate o	f Dis	burse	ment				
								M = M	/	D	D /	Υ	Y	I Y	
	Mailing Address PO Box 2059						- L	09		2	2		2015		
	•	State	Zip Code				-	Trans	eacti	on ID	. 677	48790			
	_e/g.e	KY	40588					IIalis	acti	טוו ווט	. 077	40130			
	Purpose of Disbursement				-	$\overline{}$									
	Political Contribution			0	11		Ar	moun	t of	Each	Disbu	urseme	ent this	Peri	od
	Candidate Name			Cate	agor	v/		-	-	-	-			-	
	Rep. Andy Barr				ype	y,				(II)		/II) I	400	00.00	
	•	nent For:	2016		/					/		,			
		Primary	General				D-	. 1:4: 1		. 4 : 12 4 :					
		Other (spe					PC	ontica	Cor	ntributi	on				
	State: KY District: 06	Other (spe	City) \blacktriangledown												
	Full Name (Last, First, Middle Initial)														
В.	People For Patty Murray						Da	ate o	f Dis	sburse	ment				
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	Mailing Address PO Box 3662							09		2	2		2015		
	City	State	Zip Code					Trans	anti	on ID	. 677	48792)		
	Seattle	WA	98124					IIalis	sacu	טוו ווט	. 011	40132			
	Purpose of Disbursement				-										
	Political Contribution			0	11		Ar	moun	t of	Each	Disbu	urseme	ent this	Peri	od
	Candidate Name			Cate	ogor	·//			-	-				-	
	Sen. Patty Murray				/pe	y'							20	00.00	
		nent For:	 2016									,			
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C.	Katko For Congress						Di	ate o	f Dis	burse	ment				
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	Mailing Address PO Box 133						L	09		2:	2		2015		
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	American Council of Life Insurers P	Olitical	Action Com	mittee								
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_	Full Name (Last, First, Middle Initial)					5						
Α.	Mcsally For Congress					Date of	Disburs	ement				
	Mailing Address PO Box 19128					09	/ D	22		2015	Y	
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	Rep. Martha McSally			Category Typ						1000	0.00	
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	State: AZ District: 02											
B.	Full Name (Last, First, Middle Initial) Huizenga For Congress					Date of	Disburs	ement				
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	Mailing Address P.O. Box 254					09		22		2015		
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c .	Zeeland Purpose of Disbursement Political Contribution Candidate Name Rep. Bill Huizenga Office Sought: House Senate President State: MI District: 02 Full Name (Last, First, Middle Initial) Jason Smith For Congress Mailing Address PO Box 1324	MI nent For: Primary	2016 General	Categ	ory/	Political Date of	Contribu	Disburnition ement	rsemer	2000	0.00	
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C.	Zeeland Purpose of Disbursement Political Contribution Candidate Name Rep. Bill Huizenga Office Sought: Senate President State: MI District: 02 Full Name (Last, First, Middle Initial) Jason Smith For Congress Mailing Address PO Box 1324 City Cape Girardeau Purpose of Disbursement Political Contribution Candidate Name Rep. Jason Smith Office Sought: House Disbursement Disbursement Disbursement Political Contribution Candidate Name Rep. Jason Smith Office Sought: House Disbursement	ment For: Primary Other (spe	2016 General cify) ▼ Zip Code 63702	Category Typ 011 Category	ory/ e	Political Date of 09 Trans	Contribu	Disburnition ement 22 0:6774	2 2 28796	2000 2015	y Period	
C .	Zeeland Purpose of Disbursement Political Contribution Candidate Name Rep. Bill Huizenga Office Sought: House Senate President State: MI District: 02 Full Name (Last, First, Middle Initial) Jason Smith For Congress Mailing Address PO Box 1324 City Secret Cape Girardeau Purpose of Disbursement Political Contribution Candidate Name Rep. Jason Smith Office Sought: House Senate President Senate President Disbursement Senate President Disbursement Senate President	ment For: Primary Other (spe	2016 General cify) ▼ Zip Code 63702 2016 General	Category Typ 011 Category	ory/ e	Political Date of 09 Trans	Contribu	Disburnition ement 22 0:6774	2 2 28796	2000 2015	y Period	
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		INE NUMBER: PAGE 39 OF 44					
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	Detailed Summary Page	27	28a 28b 28c 29 30b					
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NAME OF COMMITTEE (In Full)	e and address of any point	ai committee to	Solicit Contributions from Such Committee.					
American Council of Life Insurers F	Political Action Com	mittee						
Full Name (Last, First, Middle Initial)								
A. Crowley for Congress			Date of Disbursement					
Mailing Address 84-56 Grand Avenue			09 22 2015					
,	State Zip Code		Transaction ID: 67748797					
=	NY 11373		1141154041011 15 . 017 407 07					
Purpose of Disbursement Political Contribution		011	Amount of Each Disbursement this Period					
Candidate Name		Category/	2000.00					
Rep. Joseph Crowley		Туре	2000.00					
Senate	nent For: 2016 Primary General Other (specify)		Political Contribution					
State: NY District: 14								
Full Name (Last, First, Middle Initial) B. Kaine For Virginia			Date of Disbursement					
			M M / D D / Y Y Y Y					
Mailing Address 1751 Potomac Greens Drive			09 22 2015					
,	State Zip Code VA 22314		Transaction ID: 67748872					
Purpose of Disbursement Political Contribution		011	Amount of Each Disbursement this Period					
Candidate Name			Amount of Lacif Disbursement this Period					
Sen. Tim Kaine		Category/ Type	3000.00					
Office Sought: House Disbursem	nent For: 2018 Primary General Other (specify)	7,1	Political Contribution					
Full Name (Last, First, Middle Initial)								
C. John Lewis for Congress			Date of Disbursement					
Mailing Address P.O. Box 2323			09 22 2015					
City	State Zip Code							
Atlanta	GA 30301		Transaction ID: 67748873					
Purpose of Disbursement Political Contribution		011	Amount of Each Disbursement this Period					
Candidate Name		Category/						
Rep. John Lewis		Type	2000.00					
Senate	nent For: 2016 Primary General Other (specify)		Political Contribution					
State: GA District: 05								
SUBTOTAL of Disbursements This Page (optional)			7000.00					
TOTAL This Period (last page this line number only).		···· •						

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Any information copied from such Reports and State or for commercial purposes, other than using the na								
NAME OF COMMITTEE (In Full) American Council of Life Insurers	Political Action Com	mittee						
Full Name (Last, First, Middle Initial)								
Neugebauer Congressional Comr Mailing Address PO Box 54175	mittee		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
			22 2010					
City Lubbock	State Zip Code TX 79453		Transaction ID: 67748874					
Purpose of Disbursement Political Contribution		011	Amount of Each Disbursement this Period					
Candidate Name Rep. Robert Neugebauer		Category/ Type	1000.00					
Office Sought: House Disburse	ement For: 2016 Primary General Other (specify) ▼		Political Contribution					
Full Name (Last, First, Middle Initial) Neugebauer Congressional Commodition Mailing Address PO Box 54175	mittee		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City Lubbock	State Zip Code TX 79453		Transaction ID : 67748875					
Purpose of Disbursement Political Contribution		011	Amount of Each Disbursement this Period					
Candidate Name Rep. Robert Neugebauer		Category/ Type	500.00					
	ement For: 2016 Primary	,,	Political Contribution					
Full Name (Last, First, Middle Initial) Randy Hultgren For Congress			Date of Disbursement					
Mailing Address PO Box 717			09 22 2015					
City St. Charles	State Zip Code IL 60174		Transaction ID : 67748876					
Purpose of Disbursement Political Contribution Candidate Name Rep. Randy Hultgren		011 Category/ Type	Amount of Each Disbursement this Period					
	ement For: 2016 Primary General Other (specify) ▼	71.	Political Contribution					
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number onl			2500.00					

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 41 OF 44						
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		27		30b				
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NAME OF COMMITTEE (In Full)								
American Council of Life Insurers F	Political Action Comn	nittee						
Full Name (Last, First, Middle Initial)								
A. Nancy Pelosi For Congress			Date of Disbursement					
Mailing Address 700 13th St NW Suite 600			09 22 2015					
City	State Zip Code		Transaction ID : 67748877					
Washington	DC 20005		Transaction ib . 0//400//					
Purpose of Disbursement Political Contribution		011	Amount of Each Disbursement this Period	d				
Candidate Name		Category/	1000.00	П				
Rep. Nancy Pelosi		Туре	1000.00	_				
Senate	nent For: 2016 Primary General Other (specify)		Political Contribution					
State: CA District: 12								
Full Name (Last, First, Middle Initial)			Data of Dishamous and					
B. Friends Of Pat Toomey			Date of Disbursement					
Mailing Address 228 S Washington Street Suite 115			09 22 2015					
Alexandria	State Zip Code VA 22314		Transaction ID: 67748878					
Purpose of Disbursement Political Contribution		011	Amount of Each Disbursement this Period	d				
Candidate Name				_				
Sen. Pat Toomey		Category/ Type	1500.00	_				
Office Sought: House Disbursen Senate	nent For: 2016 Primary		Political Contribution					
Full Name (Last, First, Middle Initial)								
C. Stivers for Congress			Date of Disbursement					
Mailing Address 4679 Winterset Drive			09 22 2015					
City	State Zip Code							
Columbus	OH 43220		Transaction ID: 67748879					
Purpose of Disbursement Political Contribution		011	Amount of Each Disbursement this Period	d				
Candidate Name		Category/	Amount of Each bisbursement this Feriod	_				
Rep. Steve Stivers		Type	1000.00					
	nent For: 2016 Primary General		Political Contribution					
	Other (specify) ▼							
State: OH District: 15				_				
SUBTOTAL of Disbursements This Page (optional)			3500.00					
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NAME OF COMMITTEE (In Full)				
American Council of Life Insurers	Political Action Comm	nittee		
Full Name (Last, First, Middle Initial)				
A. Bennet For Colorado			Date of Disbursement	
Mailing Address PO Box 3078			09 22 2015	
City	State Zip Code		Transaction ID : 67749990	
Denver	CO 80201		Transaction ID: 67748880	
Purpose of Disbursement Political Contribution		011	Amount of Each Disbursement this Period	
Candidate Name		Category/		1
Sen. Michael Bennet		Type	1000.00	J
Office Sought: House Senate President Disburse	ment For: 2016 Primary		Political Contribution	
State: CO District:				
Full Name (Last, First, Middle Initial)				
B. Blaine For Congress			Date of Disbursement	
Mailing Address PO Box 1025		09 22 2015		
City Jefferson City	State Zip Code MO 65102		Transaction ID: 67748882	
Purpose of Disbursement Political Contribution		044	Assessed of Early District control this Desired	
Candidate Name		011	Amount of Each Disbursement this Period	
Rep. Blaine Luetkemeyer		Category/ Type	2000.00	Н
	ment For: 2016	Туре		
	Primary General Other (specify) ▼		Political Contribution	
State: MO District: 03				
Full Name (Last, First, Middle Initial) C. Blaine For Congress			Date of Disbursement	
			M M / D D / Y Y Y Y	
Mailing Address PO Box 1025			09 22 2015	
City	State Zip Code		Transaction ID : 67748883	
Jefferson City	MO 65102		11ansaction 15 : 07740003	
Purpose of Disbursement Political Contribution		011	Amount of Each Disbursement this Period	
Candidate Name		Category/	4500.00	1
Rep. Blaine Luetkemeyer		Type	1500.00	
	ment For: 2016			
Senate President	Primary		Political Contribution	
State: MO District: 03	Carer (Specify)			
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I \	ME OF COMMITTEE (In Full) Merican Council of Life Insurers F	Political Action Cor	mmittee			
	Name (Last, First, Middle Initial)					
	oder For Congress, Inc			Date of Disbursement 09 22 2015		
	erland Park	State Zip Code KS 66225		Transaction ID: 67748885		
	rpose of Disbursement Ditical Contribution		011	Amount of Each Disbursement this Period		
	ndidate Name ep. Kevin Yoder		Category/ Type	500.00		
	Senate President Disbursen	nent For: 2016 Primary General Other (specify)	71	Political Contribution		
	Name (Last, First, Middle Initial)			Date of Disbursement		
	uster For Congress, Inc. iling Address P.O. Box 1498		09 22 2015			
City		State Zip Code		Transaction ID : 67748887		
Pur	ncord pose of Disbursement plitical Contribution	NH 03302	044	Amount of Fools Diskursensent this Deviced		
Cai	ndidate Name		O11 Category/	Amount of Each Disbursement this Period 500.00		
	ep. Ann Kuster ice Sought: 😾 House Disbursen	nent For: 2016	Туре	, , ,		
Sta	Senate President	Primary General Other (specify) ▼		Political Contribution		
	Name (Last, First, Middle Initial) old For Congress			Date of Disbursement		
Ma	Mailing Address PO Box 6312			09 22 2015		
City Lib	/ ertyville	State Zip Code IL 60048		Transaction ID : 67748888		
Po	pose of Disbursement olitical Contribution		011	Amount of Each Disbursement this Period		
R	ndidate Name ep. Robert Dold		Category/ Type	1000.00		
Offi Sta	Senate President	nent For: 2016 Primary General Other (specify) ▼		Political Contribution		
SUB	FOTAL of Disbursements This Page (optional)		·····	2000.00		
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ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE I (check only 21b 27		
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NAME OF COMMITTEE (In Full) American Council of Life Insurers P			Solicit Committee.	
Full Name (Last, First, Middle Initial) A. Mike Kelly For Congress Mailing Address PO Box 476			Date of Disbursement 09 22 2015	
			22 2010	
Lyndora	tate Zip Code PA 16045		Transaction ID: 67748889	
Purpose of Disbursement Political Contribution Candidate Name Rep. Mike Kelly Office Sought: House Disbursem	ent For: 2016	011 Category/ Type	Amount of Each Disbursement this Period 2500.00	
Senate President State: PA District: 03	ent For: 2016 Primary		Political Contribution	
B. Mailing Address			Date of Disbursement	
Purpose of Disbursement	tate Zip Code		Amount of Each Disbursement this Period	
	ent For: Primary General Other (specify)	Category/ Type		
Full Name (Last, First, Middle Initial) C.			Date of Disbursement	
Mailing Address				
City S	tate Zip Code			
Purpose of Disbursement Candidate Name	Amount of Each Disbursement this Period			
	ent For: Primary General Other (specify) ▼	Type		
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